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March 30, 2015

TO: Each Supervisor

FROM: Cynthia A. Harding, M.P.H. *Cynthia A. Harding*
Interim Director

SUBJECT: **QUARTERLY UPDATE ON MULTI-DEPARTMENTAL MEDI-CAL
OUTREACH AND ENROLLMENT ASSISTANCE GRANT
(ITEM 13, BOARD AGENDA OF JUNE 10, 2014)**

This is the third report in response to Supervisor Ridley-Thomas' June 10, 2014 motion requesting the Directors of Public Health (DPH), Mental Health (DMH), Health Services (DHS), Public Social Services (DPSS), and the Sheriff's Department to provide updates on the implementation of the Multi-Departmental Medi-Cal Outreach and Enrollment Assistance Grant.

Background

On June 10, 2014, your Board approved authorization to accept a \$7 million grant award from the California Department of Health Care Services (DHCS), effective July 1, 2014 through December 31, 2016. The purpose of the Medi-Cal Outreach and Enrollment grant is to conduct outreach and enroll residents newly eligible for Medi-Cal.

On September 18, 2014, DPH provided your Board with an initial status report on the Medi-Cal outreach and enrollment start-up activities. On December 30, 2014, DPH submitted a comprehensive Quarter 1 report for the period of July 1, 2014 through September 30, 2014. This latest update contains comprehensive data from the second quarter of this project, (October 1, 2014 through December 31, 2014), and summarizes the data, and narrative reports describing the progress toward project goals. Attached to this report is the State-approved revised Project Work Plan which delineates Departmental targets for the grant activities (Attachment 1).

Target Populations

The DHCS Medi-Cal Outreach and Enrollment Assistance project aims to reach and assist specific hard-to-reach uninsured populations. The table below shows target populations and the assigned departments.

Target Population	Department
Persons with mental health disorder needs	DMH
Persons with substance use disorder needs	DPH/SAPC
Young men of color	DHS, DPSS
Incarcerated persons	Sheriff's
Families of mixed immigration status	DHS, DPH/MCAH
Persons with limited English proficiency	DHS, DPH/MCAH
Persons who are homeless	DHS

Implementation

The DPH Maternal, Child and Adolescent Health (MCAH) Program is the lead division for this project, and has taken steps to successfully implement the new grant in partnership with DMH, DPSS, DHS, DPH Substance Abuse Prevention and Control (SAPC) and the Sheriff's Department.

DPH/MCAH continues to coordinate training for outreach and enrollment staff for all departments and their subcontracting agencies, excluding DPSS. Training modules have included comprehensive overviews of Medi-Cal eligibility and enrollment procedures as well as the Children's Health Outreach Initiatives (CHOI) data system training for all outreach and enrollment staff to ensure tracking and enrollment best practices are being implemented. In the second quarter, DPH/MCAH staff convened bi-weekly workgroup calls with the participating departments to disseminate information, provide technical assistance, and determine progress on the grant. DPH/MCAH staff also maintained ongoing contact with DHCS for technical assistance and project updates, and communicated with DPH Finance for appropriate budgeting and invoicing processes.

Data Collection

DPH/MCAH continues to make enhancements to its existing outreach and enrollment CHOI data system that is being used to track grant progress. Recent improvements included a new feature where users can generate reports with the ability to group, sort, and filter data specifically required for this project. The CHOI data system continues to be used to track grant activities.

Outreach and Enrollment Progress

The Project Collaborative includes five County departments and 37 contractors and subcontractors. During this reporting period, the contracted agencies worked directly with 159 community-based organizations, faith-based organizations, and other entities on outreach and enrollment strategies to reach the specified target population(s). The number of partnering entities has doubled since the last reporting quarter data.

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During this reporting period, outreach and in-reach activities to educate potential clients were provided to 25,239 persons; 67% of the annual target for the collaborative project. A total of 4,136 persons were directly assisted with completing Medi-Cal applications; of the submitted applications, 880 individuals were successfully confirmed as enrolled in the program. The low enrollment confirmation rate is not unexpected at this point of the project as the State is still experiencing application processing/approval delays for Medi-Cal.

Overall, some of the departments experienced initial enrollment challenges due to contracting delays, hiring and training new staff, and postponed Your Benefits Now (YBN) training and access to the YBN enrollment portal. (DPSS uses the YBN system and enrollment portal and LEADER system to track benefits enrollment, and to track grant enrollment activities through this initiative.) Although some of the departments are currently below their enrollment targets, we anticipate reaching the overall goals by project end.

Strategies, progress, challenges, and solutions are briefly summarized for each department in the attached narratives summary (Attachment 2).

Also attached is the project data summary including outreach, enrollment, and retention target numbers which illustrates the year-to-date progress made by each department and by the collaborative in total (Attachment 3).

The next comprehensive quarterly report covering the January through March 2015 period will be submitted to your Board in May 2015. If you have any questions or would like additional information, please let me know.

CAH:sb

Attachments

- c: Interim Chief Executive Officer
 County Counsel
 Acting Executive Officer, Board of Supervisors
 Mental Health
 Health Services
 Public Social Services
 Sheriff's Department

Activity 1 – Program Planning and Startup

Activity 1: Identify major O&E planning and startup milestones, strategies, and activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

MILESTONE: DESCRIPTION OF STRATEGY/ACTIVITY:

For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal. Describe below what and/or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?

Collaborative Partners

Department of Public Health/ Maternal, Child, and Adolescent Health (**DPH/MCAH**)
Department of Public Health/ Substance Abuse and Prevention Control (**DPH/SAPC**)

Department of Health Services (**DHS**)

Department of Mental Health (**DMH**)

Department of Public Social Services (**DPSS**)

Sheriff's Department (**LASD**)

MILESTONES	STRATEGIES/ACTIVITIES	AB 82 POPULATION GROUP(S)	TIMELINE	WHO IS RESPONSIBLE
Enrollment Numbers/ Completed Applications: DPH/MCAH: 8,000 DPH/SAPC: 2,940 DHS: 9,000 DMH: 5,140 DPSS: 2,030 LASD: 20,000 Total: 47,110	<ul style="list-style-type: none"> - Convene and facilitate weekly LAC DHCS Grant workgroup calls with Departments to plan implementation - Work with County Chief Executive Office (CEO) on County's grant implementation Board Letter package (execute authority, determine budget allocations, finalize deliverable target numbers and scope of work) for Board of Supervisors' and DHCS's' approval - Facilitate collaboration between Departments data collection systems to ensure data collection and reporting is comprehensive and uniform 	Limited English Proficient (LEP), Mixed-status families, Homeless, Young Men of Color, Persons with Substance Use Disorder Needs, Persons with Mental Health Disorder Needs, incarcerated populations	January 2014 – ongoing	DPH/MCAH as facilitator; Partnering Depts. (DPH/SAPC, DHS, DMH, DPSS and LASD) as Workgroup members
OBJECTIVE: Finalize Work Plan and implement essential County processes to identify, screen, inform and provide Medi-Cal enrollment and retention services to all uninsured Grant target populations	<ul style="list-style-type: none"> - Facilitate the development of the Inter-Departmental invoicing system so that each Dept. bills and receives reimbursement for their work 		June – August 2014	DPH/MCAH and various IT/Database administrators for DPH/SAPC, DHS, DMH, DPSS and LASD
			April – July 2014	DPH Finance and Finance Contacts in each Partnering Dept. (DPH/SAPC, DHS, DMH, DPSS, and LASD)

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Enrollment Numbers/ Completed Applications: DPH/MCAH: 8,000 DPH/SAPC: 2,940 DHS: 9,000 DMH: 5,140 DPSS: 2,030 LASD: 20,000 Total: 47,110	<ul style="list-style-type: none"> - Develop, negotiate and finalize contract amendments and augmentations with sub-contractors, including finalizing each contractor's budgets and scopes of work for FY 14-15 and FY 15-16 - Develop, release, review and select contractors via an Request for Applications among their community provider clinic contractors and homeless services contractors - Develop list of potential locations and community partners for outreach activities and events; engage the DPSS Health and Nutrition Mobile Office (Mobile Outreach Unit) in the planning process - Conduct internal processes necessary to bring on 5 full-time Sheriff Custody Assistants who will be conducting the outreach and enrollment work within the LA County jail system - Plan and conduct trainings on Medi-Cal screening, enrollment, troubleshooting and retention, along with training on using various data collection databases - Plan and complete the internal County processes (Work Order Solicitation) necessary to hire a temporary 2-year Project Manager to oversee the entire coordination of the Grant across the partnering County Departments - Plan and conduct presentation regarding the DHCS Grant to the Everyone On Board Collaborative, a coalition of over 40 community-based organizations, health providers and government agencies whose mission is to successfully implement the ACA in LA County - Meet with community stakeholders and County Board of Supervisors district offices to discuss the County's implementation plan, reaching the target populations, addressing any gaps in outreach, and achieving enrollment targets - Present regular updates on the status of the DHCS Grant implementation at various health coverage meetings and coalitions, including Everyone on Board, LA Access to Health Coverage Coalition, DPSS/DPH Health and Nutrition (Medi-Cal and Cal Fresh) meeting, LA Health Collaborative/Insure the Uninsured Project meetings, and the DPH CHOI Outreach and Enrollment Contractors meeting 	LEP, Mixed Status Families, Homeless, Substance Use Disorder Needs, Mental Health Disorder Needs LEP, Mixed-Status Families and Homeless Young Men of Color Incarcerated population LEP, Mixed-status families, Homeless, Young Men of Color, Persons with Substance Use Disorder Needs, Persons with Mental Health Disorder Needs, incarcerated populations	April – July 2014 March-July 2014 April – July 2014 April – July 2014 April – July 2014 March-July 2014 March – June 2014 March 2014 - ongoing	DPH/MCAH, DPH/SAPC, DHS and DMH DHS DPSS LASD DPH/MCAH and their training contractor, staff and subcontractor staff from DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS, LASD as participants DPH/MCAH LASD DPH/MCAH and their training contractor, staff and subcontractor staff from DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS, LASD as participants DPH/MCAH
Enrollment Numbers/ Completed Applications: DPH/MCAH: 8,000 DPH/SAPC: 2,940 DHS: 9,000 DMH: 5,140 DPSS: 2,030 LASD: 20,000 Total: 47,110	<u>OBJECTIVE:</u> County Staff and Contractors are prepared to implement the MC Outreach and Enrollment Plan	LEP, Mixed Status Families, Homeless, Substance Use Disorder Needs, Mental Health Disorder Needs LEP, Mixed-Status Families and Homeless Young Men of Color Incarcerated population LEP, Mixed-status families, Homeless, Young Men of Color, Persons with Substance Use Disorder Needs, Persons with Mental Health Disorder Needs, incarcerated populations	April – July 2014 March-July 2014 March – June 2014 March 2014 - ongoing	DPH/MCAH and their training contractor, staff and subcontractor staff from DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS, LASD as participants DPH/MCAH LASD DPH/MCAH and their training contractor, staff and subcontractor staff from DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS, LASD as participants DPH/MCAH

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Activity 2 – Outreach and Enrollment Activities

Activity 2: Identify major O&E activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

Activity 2a – Outreach

Outreach is a service provided when we raise an individual's awareness/understanding of what is Medi-Cal and what can be done to enroll.

How to measure: An “outreach or in-reach contact” is defined as speaking directly either in person or by telephone with a client or potential client(s) to publicize available health care options and services. Outreach contacts may include education, promotion, presentations, and informational activities and may be to individuals or groups of people who may be clients, potential clients or personnel with access to potential clients.

MILESTONE: *For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal.*

DESCRIPTION OF STRATEGY/ACTIVITY: *Describe below what and/or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?*

Outreach Numbers:

DPH/MCAH- 30,000
DPH/SAPC- 8,400
DHS- 12,000
DMH- 19,040
DPSS- 13,920
<u>LASD- 20,000</u>

Collaborative Total: 103,360

MILESTONES	STRATEGIES/ACTIVITIES	LOCATION*	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH Outreach Contacts Total: 30,000 (15,000/year)	<ul style="list-style-type: none"> - Contracted agencies will hire additional staffing to fulfill DHCS grant personnel and conduct DHCS Grant Scope of Work activities - Agencies will schedule outreach events and maintain a list or calendar of sites, dates and times 	Across LA County – one or more agencies in each of the 8 Service Planning Areas (SPAs)	LEP and Mixed Status Families	July – September 2014	DPH/MCAH Contracted Agencies
	<ul style="list-style-type: none"> - Agencies will conduct outreach via telephone, walk-ins, events (presentations, fairs, etc.) and complete outreach summaries. Event summaries to include site, date, name of staff, flyers, number of individuals contacted, sign-in sheets and if appropriate, materials presented 	Across LA County's 8 SPAs		July 2014 – June 2016	DPH/MCAH Contracted Agencies
				July 2014-June 2016	DPH/MCAH Contracted Agencies

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Partner: DPH/SAPC Outreach Contacts Total: 8,400 (4,200/year)	- Initiate outreach to patients of Substance Use Disorder (SUD) treatment programs	At each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCS), with one located in each SPA in LA County	Sept. 2014 – June 2016	DPH/SAPC Contracted Community Assessment Service Centers (CASCS)
	- Outreach and education patients of SUD treatment services and those seeking services about Medi-Cal - Initiate Medi-Cal eligibility screening with patients of SUD treatment programs and those seeking entrance to programs	Each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCS)	Sept. 2014 – June 2016	DPH/SAPC Contracted Community Assessment Service Centers (CASCS)
Partner: DHS Outreach Contacts Total: 12,000 (Year 1: 7,200; Year 2: 4,800)	- The 7 DHS Grantees selected through a solicitation process of CP and ICMS providers will hire their FTE Outreach and Enrollment Worker	Each of the 7 DHS Grantee CP and ICMS providers, located in each of the LA County SPAs	July- Sept. 2014	DHS Contracted Grantees – CP and ICMS providers
	- The 7 DHS Grantees will schedule and perform outreach activities aimed at the target populations in community-based settings, outside of clinic/provider walls. These include gyms, community/trade colleges, community gathering events, homeless shelters and other areas of high concentrations of homeless (e.g.; Skid Row), and in people's homes utilizing the Promotora model	LEP, Mixed status families, Young Men of Color, an homeless individuals SPA 1,2,3,4,6,7, and 8	By December 2014 – June 2016	DHS Contracted Grantees – CP and ICMS providers

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Partner: DMH	<ul style="list-style-type: none"> - DMH contracted benefits establishment agencies will identify organizations and entities within DMH directly-operated and contracted programs to receive in-reach activities. - Schedule in-reach activities - Perform in-reach activities 	<p>Throughout DMH directly-operated and contracted programs, which are located across LA County's 8 SPAs</p>	<p>August 2014 – June 2016</p>	<p>DMH contracted benefits establishment agencies</p>
In-reach and Outreach Contacts Total: 19,040 (9,520/year) <ul style="list-style-type: none"> • In-reach Total: 9,520 (4,760/year) • Outreach Total: 9,520 (4,760/year) 	<ul style="list-style-type: none"> - DMH contracted benefits establishment agencies will identify organizations and entities in the community to receive outreach activities. - Schedule outreach activities - Perform outreach activities 	<p>Across LA County's 8 SPAs at locations that include: CBOs serving under-represented ethnic populations; faith-based organizations, such as, churches, temples and mosques; National Alliance on Mental Illness (NAMI) chapters; transition-age youth (TAY) drop-in centers; emergency shelter programs; disabled student centers on community college campuses; and homeless shelters and encampments.</p>	<p>Persons with mental health disorder needs</p>	<p>August 2014 – June 2016</p>
Partner: DPSS	<ul style="list-style-type: none"> - (DPSS) will participate in outreach events in venues attractive to young men of color. - Develop calendar of events - Calendar DPSS Mobile Outreach Unit to attend events 	<p>Events will take place across the 8 LA County SPAs may potentially include: Fiestas Patrias Taste of Soul Care Harbor Fiesta Broadway</p>	<p>Young Men of Color</p>	<p>September 2014 – June 2016</p>
Outreach Contacts Total: 13,920 (6,960/year)		<p>Grand Prix of Long Beach Antelope Valley Fair 626 Night Market LA Greek Festival Walnut Park Summer Fests Watts Summer Fest Wilmington Health Festival Community College Events</p>		<p>DPSS and DPSS Mobile Outreach Unit</p>

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<ul style="list-style-type: none"> - DPS will partner with community-based organizations, non-profits and other county agencies to outreach to young men of color through print media and other marketing channels. - Develop calendar of events - Calendar DPSS Mobile Outreach Unit to attend events - DPS will partner with county departments to provide on-site workshops specifically geared towards youth including health check-ups provided by county departments - Develop calendar of events - Calendar DPSS Mobile Outreach Unit to attend events 	<p>Across LA County's 8 SPAs</p>	<p>Young Men of Color</p>	<p>September 2014 – June 2016</p>	<p>DPSS and DPSS Mobile Outreach Unit</p>
<p>Partner: LASD Outreach Contacts Total: 20,000 (10,000/year)</p>	<ul style="list-style-type: none"> - LASD will obtain Medi-Cal educational materials and post within the intake centers and inmate housing units. LASD Custody Assistants within the Community Transition Unit will educate inmates about Medi-Cal, answer questions, and check inmates records for Medi-Cal eligibility 	<p>Outreach and Enrollment activities will take place within 7 jail facilities across LA County</p>	<p>Incarcerated populations</p>	<p>July 2014-June 2016</p>

*Across LA County – one or more agencies/departments in each of the 8 Service Planning Areas (SPAs): 1. Antelope Valley, 2. San Fernando Valley, 3. San Gabriel Valley (including Pasadena), 4. LA Metro, 5. Westside/Santa Monica, 6. South LA, 7. Southeast LA County, 8. South Bay and Long Beach

Activity 2 – Outreach and Enrollment Activities

Activity 2: Identify major O&E activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients targeted by O&E efforts by X).

Activity 2b – Enrollment

Enrollment is measured as the number of approved Medi-Cal applications resulting from Medi-Cal outreach and application assistance efforts.

How to measure: Two steps need to be completed in order to measure enrollment: **completed applications and confirmed enrollment.**

1. "**Completed applications**" is defined as the number of clients assisted to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission.
2. "**Confirmed enrollment**" is defined as: 1) the number of clients who have stated that they received successful enrollment notification from insurer and/or 2) the number of clients who have been enrolled by appropriate insurer or computer system.

MILESTONE:

For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal.

Enrollment Numbers

1. Completed Applications :	2. Confirmed Enrollment:
DPH/MCAH - 8,000	DPH/MCAH – 6,000
DPH/SAPC - 2,940	DPH/SAPC – 2,205
DHS - 9,000	DHS – 6,750
DMH - 5,140	DMH – 3,855
DPSS - 2,030	DPSS – 2,030
<u>LASD - 20,000</u>	<u>LASD – 5,000</u>
	Collaborative Total: 25,840

MILESTONES

STRATEGIES/ACTIVITIES	LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH Completed Applications Total: 8,000 (4,000/year) Confirmed Enrollment Total: 6,000 (3,000/year)	- DPH/MCAH contracted agencies will conduct enrollment activities - Contracted agencies will screen for Medi-Cal eligibility and also refer clients for other appropriate social services - Contracted agencies will conduct enrollment verification and troubleshooting	Across LA County's 8 SPAs	LEP and Mixed Status Families	July 2014-June 2016 July 2014-June 2016 Oct 2014–June 2016

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Partner: DPH/SAPC Completed Applications Total: 2,940 Confirmed Enrollment Total: 2,205 (1,470/year) (1,103/year)	<ul style="list-style-type: none"> - Initiate application assistance activities with patients screened as likely Medi-Cal eligible. - Initiate Medi-Cal screening and application assistance activities for persons seeking admission to SUD services through CASCs. - Assist clients with and/or conduct enrollment activities, including enrollment verification - Refer clients to appropriate SUD and ancillary services, as needed 	<p>Each of the 8 DPH/SAPC's contracted Community Assessment Service Centers (CASCs)</p>	<p>Persons with Substance Use Disorder needs</p>	<p>By December 2014 – June 2016</p>	<p>DPH/SAPC Contracted Community Assessment Service Centers (CASCs)</p>
Partner: DHS Completed Applications Total: 9,000 (Year 1: 5,400; Year 2: 3,600) Confirmed Enrollment Total: 6,750 (Year 1: 4,050; Year 2: 2,700)	<ul style="list-style-type: none"> - Grantee's O&E workers will take a minimum of 75 applications per month for 24 months, with a goal of 75% of these resulting in a Medi-Cal enrollment 	<p>SPA 1,2,3,4,6,7, and 8</p>	<p>LEP, Mixed status families, Young Men of Color, an homeless individuals</p>	<p>By December 2014 – June 2016</p>	<p>DHS Contracted Grantees – CP and ICMS providers</p>
Partner: DMH Completed Applications Total: 5,140 (2,570/year) Confirmed Enrollment Total: 3,855 (1,928/year)	<ul style="list-style-type: none"> - Conduct enrollment activities for existing DMH clients and individuals in the community and file reconsideration applications when applicable - Conduct enrollment verification and troubleshooting 	<p>Throughout the 8 LA County SPAs at DMH directly-operated and contracted programs and at community-based locations including:</p> <ul style="list-style-type: none"> - at locations that include CBOs serving under-represented ethnic populations; - faith-based organizations, such as, churches, temples and mosques; - National Alliance on Mental Illness (NAMI) chapters; - transition-age youth (TAY) drop-in centers; - emergency shelter programs; - disabled student centers on community college campuses; and - homeless shelters and encampments. 	<p>Persons with mental health disorder needs</p>	<p>August 2014 – June 2016</p> <p>November 2014-June 2016</p>	<p>DMH contracted benefits establishments agencies</p>

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Partner: DPSS Completed Applications Total: 2,030 (1,015/year) Confirmed Enrollment Total: 2,030 (1,015/year)	<ul style="list-style-type: none"> - At DPSS outreach and enrollment events, DPSS Staff via the Mobile Outreach Unit will conduct enrollment activities onsite, including eligibility screening and application submission 	<p>Across the 8 County SPAs and may potentially include:</p> <ul style="list-style-type: none"> - Fiestas Patrias - Taste of Soul - Care Harbor - Fiesta Broadway - Grand Prix of Long Beach - Antelope Valley Fair - 626 Night Market - LA Greek Festival - Walnut Park Summer Watts Summer Fest - Wilmington Health Festival - Community College Events 	<p>Sept. 2014-June 2016</p>	<p>Young Men of Color</p>	<p>DPSS and DPSS Mobile Outreach Unit</p>
Partner: LASD Completed Applications Total: 20,000 (10,000/year) Confirmed Enrollment Total: 5,000 (2,500/year)	<ul style="list-style-type: none"> - LASD will develop a questionnaire to screen for Medi-Cal eligibility within the intake process. - LASD will collect and submit all necessary supporting documentation to DPSS for successful enrollment into Medi-Cal that will take effect upon the inmate's release. 	<p>Enrollment activities will take place within 7 jail facilities across LA County</p>	<p>Incarcerated populations</p>	<p>July 2014-June 2016</p>	<p>LASD Custody Assistants within the Community Transition Unit</p>

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Activity 3 – Retention

Activity 3: Identify major O&E retention activities. Identify the AB 82 population groups each effort will target and for each targeted group (e.g., persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails/prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency), how many you expect to re-enroll (i.e. Increase the number of targeted Medi-Cal enrollees who retain their Medi-Cal eligibility by X).

Retention is a service provided when we track an enrolled individual's re-application time line to Medi-Cal, and take all the available steps afforded by that individual towards their continued enrollment in, and their retention of, Medi-Cal.

How to measure: Two steps need to be completed in order to measure retention:

1. "Redetermination assistance" is defined as attempting to contact 100% of clients/beneficiaries (confirmed enrolled) and making successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.
2. "Retention rate" is defined as the percentage of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).

DESCRIPTION OF STRATEGY/ACTIVITY:

Describe below what and/or how each partner plans on achieving their goals that are identified in the adjacent milestones. What methods/means will be used to achieve these goals and objectives?

Redetermination Assistance:

DPH/MCAH - 3,900
DPH/SAPC - 1,433
DHS - 4,388
DMH - N/A
DPSS - 1,319
LASD - N/A
Collaborative Total: 11,040

MILESTONES	STRATEGIES/ACTIVITIES	LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Partner: DPH/MCAH Retention Activities <ol style="list-style-type: none"> 1. Redetermination Assistance Total: 3,900 2. Retention Rate. 	<ol style="list-style-type: none"> 1. Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal. 2. Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins). 	Across LA County's 8 SPAs	Limited English Proficient and Mixed status	June 2015 - ongoing	DPH/MCAH Contracted agencies

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<p>Partner: DPH/SAPC</p> <p>Retention Activities</p> <ol style="list-style-type: none"> 1. Redetermination Assistance Total: 1,433 2. Retention Rate. 	<p>1. Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.</p> <p>2. Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins). - Conduct planning meetings with DPSS personnel to complete arrangements for regional linkages between SAPC CASC contracted agencies and DPSS district liaisons</p>	<p>At the SAPC CASC contracted agencies - across LA County's 8 SPAs</p>	<p>Persons with substance use disorder needs</p>	<p>June 2015 - ongoing</p>	<p>DPH/SAPC CASC contracted agencies</p>
<p>Partner: DHS</p> <p>1. Redetermination Assistance Total: 4,388</p> <p>2. Retention Rate.</p>	<p>1. Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.</p> <p>2. Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins). - DHS contracted O&E workers will combine their outreach and enrollment efforts with aggressive retention/redetermination strategy - DHS contractors will personally contact the Medi-Cal recipients that they enrolled twelve months prior by phone, in person or through any other in-person strategy to obtain submission of necessary redetermination paperwork within the redetermination period.</p>	<p>SPA 1,2,3,4,6,7, and 8</p>	<p>LEP, Mixed status families, Young Men of Color, and homeless individuals</p>	<p>June 2015 - ongoing</p>	<p>DHS contracted agencies</p>

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Partner: DMH 1. Redetermination Assistance 2. Retention Rate.	<p>1. Attempt to contact 100% of clients/beneficiaries (confirmed enrolled) and make successful contact with 65% of those clients/beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.</p> <p>2. Of those clients that successful contact was made, determine the number of clients who are still enrolled 11-12 months after Medi-Cal enrollment date (first day that benefits coverage begins).</p> <ul style="list-style-type: none"> - Agency financial worker meets with client at intake and annually thereafter to do an eligibility check for Medi-Cal benefits - If there is an interruption in benefits, financial worker works with client to determine why client was dropped from Medi-Cal - If client needs further assistance, they are referred to a medical case worker to help facilitate linkage to DPSS. The caseworker will help the client contact their DPSS case worker to reinstate benefits and/or complete redetermination - DMH contracted agencies will conduct retention activities, contacting the clients at 11 months to offer retention assistance 	<p>At DMH directly-operated and contracted agencies located across LA County's 8 SPAs</p>	Persons with mental health disorder needs	June 2015 - ongoing	DMH directly-operated and contracted agencies
				August 2014-June 2016	
Partner: DPSS 1. Redetermination Assistance Total: 1,319 2. Retention Rate.	<p>- DPSS staff will conduct re-determination activities with target population prior to re-determination date.</p> <p>- DPSS staff will follow-up with enrollees to ensure any pending terminations are valid</p>	Across LA County's 8 SPAs	Young Men of Color	April 2015-June 2016	DPSS Staff (Eligibility Workers and Mobile Outreach Unit Staff)

Activity 4 – Tracking and Reporting

Activity 4 : Identify your intent and list the AB 82 population groups that you will contract to target. Identify for each targeted group, how many you intend to enroll (i.e. Increase the number of Medi-Cal eligible clients in XXX County who receive outreach, education and information regarding the AB 82 targeted populations (e.g. persons with mental health disorder needs, persons with substance use disorder needs, homeless, young men of color, persons in jails, prison, parole probation or post release community supervision, families of mixed immigration, and person with limited English proficiency)).

		Redetermination Assistance Numbers			
DESCRIPTION OF ACTIVITY:		Enrollment Numbers		Redetermination Assistance Numbers	
MILESTONE:	For each objective, list each partner separately and indicate the number of individuals that they plan to enroll into Medi-Cal.	Completed Applications : DPH/MCAH - 8,000 DPH/SAPC - 2,940 DHS - 9,000 DMH - 5,140 DPSS - 2,030 LASD - 20,000 Collaborative Total: 47,110	Confirmed Enrollment: DPH/MCAH – 6,000 DPH/SAPC – 2,205 DHS – 6,750 DMH – 3,855 DPSS – 2,030 LASD – 5,000 Collaborative Total: 25,840	DPH/MCAH - 3,900 DPH/SAPC - 1,433 DHS - 4,388 DMH – N/A DPSS – 1,319 LASD - N/A Collaborative Total: 11,040	July 2014-June2016 All Departments (DPHMCAH, DPH/SAPC, DHS, DPSS, LASD)
STRATEGIES/ACTIVITIES		LOCATION	TARGET POPULATION	TIMELINE	WHO IS RESPONSIBLE
Tracking and Reporting Strategy #1: Tracking Outreach Data		Online database, accessible by each Grant Partner (County Department) and their subcontracted community agencies throughout LA County	- DPH/MCAH: LEP and Mixed Status Families - DPH/SAPC: Persons with Substance Use Disorder needs - DMH: Person with Mental Health Disorder needs - DHS: LEP, Mixed-status families, Young Men of Color and Homeless - DPSS: Young Men of Color - LASD: Incarcerated population	July 2014-June2016	All Departments (DPHMCAH, DPH/SAPC, DHS, DPSS, LASD)
Activities:		<p>Within DPH/MCAH, the CHOI Unit has maintained an on-line database for tracking and reporting health coverage outreach, enrollment, utilization and retention for over 12 years. DPH/MCAH has offered access for each Department to use the CHOI database for tracking of outreach information. Outreach can be tracked and reports generated by agency/dep. conducting the outreach, client, event, location in LA County (city, zip code, and SPA). Departments will also be tracking target population outreach to.</p> <p>Departments who do not use the CHOI database will be tracking outreach numbers using the same data collection fields listed above from an alternate database/data collection format.</p> <p>All Departments, regardless of database/data collection system used, will report outreach numbers to the DHCS Grant Project Manager on a regular basis. The Research Analyst will then collect and aggregate the outreach data to include in quarterly progress report to DHCS and the County Board of Supervisors.</p>			

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<p>Tracking and Reporting Strategy #2: Use of the DPH/MCAH Choi Database for tracking and reporting Application Assistance, Enrollment and Retention Activity</p> <p>Activities:</p> <ul style="list-style-type: none"> - DPH/MCAH Choi Database users will be tracking applications submitted, enrollments verified, troubleshooting assistance provided, renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year. 	<p>Online database accessible by each Choi Database</p> <p>Department /Subcontractor user throughout LA County. LASD Custody Assistants in County jail complexes will work closely with MCAH to facilitate tracking reporting</p>	<p>- DPH/MCAH: LEP and Mixed Status DHS: LEP, Mixed-status families and Homeless</p> <p>- DMH: Persons with Mental Health Disorder needs; subcontractor Mental Health Advocacy Services (the first of DMH's 2 subcontractors) are using the Choi Database</p>	<p>July 2014-August 2016</p>	<p>DPH/MCAH, DHS, LASD, and DMH, including DMH's subcontractor Mental Health Advocacy Services (the first of DMH's 2 subcontractors) are using the Choi Database</p>
<p>Tracking and Reporting Strategy #3: Use of DPH/SAPC Database for tracking and reporting Application Assistance, Enrollment and Retention Activity</p> <p>Activities:</p> <ul style="list-style-type: none"> - DPH/SAPC contracted CASC agencies will use Choi database to track applications submitted, enrollments verified, renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year 	<p>Database will be accessible by each of DPH/SAPC's 8 contracted CASC agencies, located in each SPA in LA County</p>	<p>- DPH/SAPC: Persons with Substance Use Disorder needs</p>	<p>July 2014-August 2016</p>	<p>DPH/ SAPC</p>
<p>Tracking and Reporting Strategy #4: Use of DPSS's LEADER system</p> <p>Activities:</p> <ul style="list-style-type: none"> - DPSS and LASD will use DPSS's LEADER system to track applications submitted and enrollments verified. DPSS will also use LEADER to track renewal/redetermination assistance offered and provided, and successful retention in Medi-Cal after 1 year. 	<p>LEADER is accessible County-wide by DPSS staff</p> <ul style="list-style-type: none"> - Eligibility Workers and the Mobile Outreach Unit. 	<p>- DPSS: Young Men of Color</p>	<p>July 2014-June 2016</p>	<p>DPSS</p>

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<p>Tracking and Reporting Strategy #5: Use of DMH Contracted Agency's data collection system</p> <p>Activities:</p> <ul style="list-style-type: none"> - DMH's second subcontractor, Health Advocates, will be using their own database to track applications submitted, enrollments verified and renewal/redetermination assistance offered 	<p>Health Advocates' database is accessible to all contracted staff on this grant working with clients in areas across LA County.</p> <p>DMH: Persons with Mental Health Disorder needs; subcontractor Health Advocates has target of 2,570 enrollments</p> <p>August 2014 – June 2016</p> <p>DMH and DMH's subcontractor Health Advocates (the second of DMH's 2 subcontractors)</p>
<p>Tracking and Reporting Strategy #6: Collecting and Aggregating Data across Departments, reporting to DHCS and LA County Board of Supervisors</p> <p>Activities:</p> <ul style="list-style-type: none"> - The DHCS Project Manager, housed at DPH/MCAH, will collect outreach, application assistance, enrollments and re-determination and renewal data from each Department. The Research Analyst will then analyze, combine, and aggregate the data to include in quarterly progress report to DHCS and the County Board of Supervisors. 	<p>Data will be collected across LA County and reported on at the County level and target population</p> <p>- DPH/MCAH: LEP and Mixed Status Families</p> <p>- DPH/SAPC: Persons with Substance Use Disorder needs</p> <p>- DMH: Person with Mental Health Disorder needs</p> <p>- DHS: LEP, Mixed-status families, Young Men of Color and Homeless</p> <p>- DPSS: Young Men of Color</p> <p>- LASD: Incarcerated population</p> <p>October 2014 – June 2016</p> <p>Each Dept. (DPH/MCAH, DPH/SAPC, DHS, DMH, DPSS and LASD) is responsible for collecting within their Dept. the target population deliverable data and submitting it to the DHCS Project Manager.</p> <p>The DHCS Project Manager is responsible for collecting, analyzing and aggregating the data for DHCS and LA County Supervisors.</p>

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1. Indicators or benchmarks County used to meet the objectives, as described in Work Plan. List County's accomplishments and progress to date.

DPH/MCAH:

Outreach: DPH/MCAH provided outreach activities to 6,628 individuals
Enrollment: 1,412 persons were assisted with completing Medi-Cal applications of which 394 individuals were successfully enrolled

DPH/SAPC:

Outreach: DPH/SAPC provided outreach activities to 2,922 individuals
Enrollment: 54 persons were assisted with completing Medi-Cal applications

DHS:

Outreach: DHS provided outreach activities to 4,968 individuals
Enrollment: 413 persons were assisted with completing Medi-Cal applications of which 48 individuals were successfully enrolled

DMH:

Outreach: DMH provided outreach and in-reach activities to 6,191 individuals
Enrollment: 408 persons were assisted with completing Medi-Cal applications of which 128 individuals were successfully enrolled

DPSS:

Outreach: DPSS provided outreach activities to 2,600 individuals
Enrollment: 67 persons were assisted with completing Medi-Cal applications of which 34 individuals were successfully enrolled

Sheriff's Department:

Outreach: Sheriff's Department provided in-reach activities to 1,930 inmates
Enrollment: 1,782 persons were assisted with completing Medi-Cal applications of which 276 individuals were successfully enrolled. Additional 412 applications are either awaiting the 45 days to release window for submission, or are waiting processing by DPSS

COLLABORATIVE (All Departments)		FY 2014-2015 Annual Target Numbers/Goals	Quarter 1 07/01/14- 09/30/14	Quarter 2 10/01/14- 12/31/14	Quarter 3 01/01/15- 03/31/15	Quarter 4 04/01/15- 06/30/15	FY 2014-2015 Year To Date Numbers
Outreach		52,880	10,231	25,239	-	-	35,470
Enrollment	Completed Applications	24,455	3,724	4,136	-	-	7,860
	Confirmed Enrollment	13,596	525	880	-	-	1,405
Retention	Redetermination Assistance	5,371	N/A**	N/A**	-	-	-

** Redetermination assistance is provided at the time of annual eligibility review/renewal. None to report for Quarter 2

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2. List community-based organizations (CBOs), including current sub-contractors, other community organizations and faith-based organizations (FBOs) that the County partnered with to accomplish grant objectives.

DPH/MCAH:

- Asian Pacific Health Care Venture, Inc. (SPA 3&4)
 - Partnering with AHMC Health Foundation, Korean Health Education and Research Center (KHEIR), Rosemead and Mountain View School Districts, WICs, and Asian American Advancing Justice-LA
- Child and Family Guidance Center (SPA 2)
 - Partnering with Our Lady of Peace Church, Santa Rosa Church, Maria Inmaculada Church, San Luis Obrero Church, El Redil Church, Church on the Way, Park Parthenia Apartment, Pals Youth Center, Aurora Medical Center, Kids & Teen Medical Group, Clinica de la Mujer, Clinica Las Americas, Northridge Hospital Medical Center, Superior Supermarkets, Schools, Best Start Panorama City, Best Start Pacoima, California State University, Northridge, Pierce College, Valley College, Health Net Bus, Blue Shields, and Mission College
- Citrus Valley Health Partners (SPA 3)
 - Partnering with Family Birth & Newborn Center, Promotoras de Salud, Welcome Baby Program, Queen of the Valley Hospital, Church of the Nativity, St. Martha's Catholic Church, Our Lady of Guadalupe, and St. Louis Of France Church
- City of Long Beach (Citywide)
- City of Pasadena Public Health Department (Citywide)
 - Partnering with the City of Pasadena Human Services and Recreation Department, Chapcare, Women, Infants and Children (WIC) – Pasadena, Villa Parke Community Center, and Huntington Hospital,
- Community Health Councils, Inc. (SPA 6&8)
 - Partnering with Watts Labor Community Action Committee (WLCAC), Southeast Crenshaw Worksource, South LA Worksource, Inglewood Business and Career Center, Gardena Business and Career Center, Torrance Career Center, South Bay Beach Cities Career Center, Carson South Bay Career Center, St. Margaret Center, CADRE, Community Career Development, LA South/Compton Workforce/Employment Development Department (EDD), LA Crenshaw EDD, Housing Authority: Imperial Courts, Nickerson Gardens, Jordan Downs, and Martin Luther King, Jr. Community Hospital
- Computer Therapy LLC (Countywide)
- Crystal Stairs, Inc. (SPA 8)
 - Dignity Health dba California Hospital MC (SPA 4&6)
- Human Services Association (SPA 7)
 - Partnering with WIC - Bell Garden, WIC – South Gate, Tri-Cities Head Start, various clinics throughout SPA 7, Kid's 1st preschools, Norwalk La Mirada Unified School District, ICDC adult colleges, and Rio Hondo Community College
- Los Angeles Unified School District (Schools)
 - Partnering with Early Childhood Linkages to Wellness (ECLW), KHEIR Health Services, Healthy Start, and SEPA Center
- Maternal and Child Health Access – Outreach (SPA 3,4,6&7)
 - Partnering with Neighborhood Legal Services, Alliance for Children's Rights, Jovenes Inc., ELA Women's Center, Worksite Wellness LA, LAC USC Medical Center, and WIC
- Maternal and Child Health Access – Training (Countywide)
 - Northeast Valley Health Corporation (SPA 2)

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- Partnering with Women, Infants and Children (WIC)
 - St. Francis Medical Center of Lynwood (SPA 7)
 - Partnering with Montebello, Los Nietos/Whittier, EL Rancho Unified School Districts, Pediatric and OB/GYN offices
 - Valley Community Clinic (SPA 2)
 - Partnering with Child and Family Guidance, LAUSD schools, Coalition for Humane Immigrant Rights of Los Angeles (CHIRLA), Child Care Resource Center (CCRC) Head Start sites, and local churches
 - Venice Family Clinic (SPA 5)
 - New Directions

DPH/SAPC:

- Behavioral Health Services (SPA 8)
- California Hispanic Commission on Alcohol Drug Abuse (SPA 7)
- Didi Hirsch Community Mental Health Center (SPA 5)
- Homeless Health Care (SPA 4)
- Prototypes (SPA 3)
- San Fernando Valley Community Mental Health Center (SPA 2)
- Special Service for Groups (SPA 6)
- Tarzana Treatment Centers (SPA 1)

DHS:

- AltaMed Health Services Corporation (SPA 4)
 - Partnering with the East Los Angeles Sheriff Station, Federacion Zacatecana, Primer Amor Christiano Church, JC Sales, Inc., Northgate Supermarket, Primer Amor Christiano Church, El Super Market, Heart of Compassion, Universal Church, WIC, and Resurrection Catholic Church
- Bartz-Altadonna Community Health Center (SPA 1)
 - Partnering with the Coursan Park Ministry, Highlands Christian Fellowship, Penny Lane, Oasis Church, Vineyard Church, Twin Lake Community Church, Korean Saram Church, Boys and Girls Club, Catalyst Foundation, Desert Winds Community Church, Palmdale Dream Center, Child Bureau, Homeless Solutions Access Center, St. Vincent de Paul, Antelope Valley Rescue Mission, and Total Deliverance Church
- Chinatown Service Center (SPA 3)
 - Partnering with County libraries, schools, child care centers, and managed care plans
- Clínica Monseñor Óscar A. Romero (SPA 7)
 - Partnering with The Mexican Consulate's Ventanilla de Salud, The Wall Las Memorias, St. Francis Center, LA Care, and Molina Health Plan
- Mission City Community Network, Inc. (SPA 8)
 - Partnering with WIC-Mother's Nutrition Center and St. Johns Chrystostom Church & School
- Samuel Dixon Family Health Center (SPA 2)
 - Partnering with Val Verde Recreational Park, College of the Canyons, Serra Community Medical Clinic, Savia Community Partnership – Real Life Church, Light of Hope, Domestic Violence Center, Providence Medical Centers, LA Care Rec Center, LA Care Permanent Hospital and Kaiser Permanente Hospital

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- University Muslim Medical Association (UMMA) Community Clinic (SPA 6)
 - Partnering with Strategic Concepts in Organizing Policy and Education (SCOPE), the Salvation Army, Los Angeles Conservation Corp Coalition of Mental Health Professionals, Homeless Projects, City Young of South Los Angeles, El Camino College, His Sheltering Arms, Inc., LA Tech Community College, S.W. College, Angeles Mesa Library, Office of Council Curren Price, Mosque-Omar Ibn Al Kitar, Alliance Renee & Meyer Laskin Academic, Weber Community Center, Faith and Christ Church, Community Builds Coalition, El Super Market, and Testimonial Church

DMH:

- Health Advocates
 - Mental Health Advocacy Services
- Year-to-date, the Health Advocates and Mental Health Advocacy Services established a total of 558 collaborations with 506 local providers, of which 150 collaborations are targeted for in-reach activities and 408 collaborations are targeted for outreach activities

DPSS:

- Partnering with Young Invincibles

Sheriff's Department:

N/A

- 3. List of specific activities that were completed for the project by Department/sub-contractors/CBOs/FBOs. Describe the role of each sub-contractor/CBO/FBO and what they do for the project.**

DPH/MCAH:

DPH/MCAH, the Lead Department/Division on the DHCS grant, contracted with 17 agencies on this project. All contracted agencies reached out to collaborative partners and partnered with more than 85 agencies in the community to make them aware of the services. Agency staff attended number of trainings that included: CHOI Forms training, "We've Got You Covered" training, YBN training, Medi-Medi Connect training, and Covered CA Outreach and Education training. Agencies were trained to use CHOI database system and capture their outreach and enrollment work.

- Child and Family Guidance Center organized a Park Parthenia Annual Health Fair and participated in numerous health fairs in San Fernando Valley to perform outreach and enrollment activities
- Citrus Valley Health Partners provided ongoing assistance to 387 clients experiencing problems with enrollment, utilization of benefits and retention
- Maternal and Child Health Access partnered with five agencies and provided outreach and enrollment assistance to homeless, at-risk young, low-income women, foster youth, emancipated minors, and relative caretakers
- Venice Family Clinic partnered with New Directions and provided weekly presentations during orientation days to assist veterans with Medi-Cal enrollment

DPH/SAPC:

DPH/SAPC contracted with eight Community Assessment Service Centers (CASC) for this project. During the second quarter, CASC providers reached out to Substance Use Disorder (SUD) clients within each of their SPAs at the following locations: faith communities, colleges with addiction study programs, Alcoholic Anonymous (AA) groups, homeless encampments, and community health fairs.

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DHS:

- The first YBN training for CBOs was held by DPSS on November 6, 2014. By the end of December 2014, all CBOs received YBN login access and became fully operational to enroll individuals into Medi-Cal.
- Altamed Health Services Corp. reported 7 Medi-Cal completed applications
- Chinatown Service Center (CSC) reported 142 Medi-Cal completed applications and provided outreach to 374 individuals. CSC set up satellite enrollment stations at elementary schools, child care centers, and County libraries. In addition, CSC utilized partner's mobile van to provide off-site enrollment assistance
- Clinica Monseñor Óscar A. Romero conducted outreach to 88 individuals and completed 10 Medi-Cal applications by hosting a Resource Fair at its Alvarado Clinic and attending two health fairs in collaboration with the Mexican Consulate
- UMMA Community Clinic reported 92 Medi-Cal completed applications and provided outreach to 513 individuals
- Bartz-Altadonna Community Health Center reported 38 Medi-Cal completed applications and provided outreach to 2,868 individuals
- Samuel Dixon reported 87 Medi-Cal completed applications and provided outreach to 494 individuals. Outreach and enrollment activities were performed by promoting of enrollment days and scheduling of individual enrollment appointments

DMH:

During the second quarter, Health Advocates, LLC and Mental Health Advocacy Services, Inc. conducted 91 in-reach activities and served 291 existing mental health clients referred from within DMH network. The subcontractors also conducted 302 outreach activities at CBOs, FBOs, Shelter Care programs, and Disabled Students Centers to 5,900 potential clients. Additionally, DMH's subcontractors delivered 25.5 hours of training to 17 local providers in Quarter 2. Year-to-date, a total of 39 hours of training delivered to 26 local providers to ensure they are fully versed in the ACA, Medi-Cal program, and enrollment process.

DPSS:

The DPSS Eligibility Systems Division provided YBN training to 25 users from the DPH and DHS.

Sheriff's Department:

Five (5) full time custody assistants completed the following functions:

- Contacted the jail population and provided in-reach activities to 1,920 inmates
- Assisted the inmates by completing applications for those who wished to receive Medi-Cal coverage
- Submitted the applications to DPSS to determine if the individuals already had coverage or an application was in process
- Applications submitted were entered into the YBN system
- The YBN was monitored to determine if the applications were processed by DPSS. 276 applicants were confirmed as newly enrolled

4. Any innovative strategies/practices that were successful and can serve as a model for others or that County can build upon.**DPH/MCAH:**

- Computer Therapy LLC held multiple CHOI webinars via GoTo meeting interface. These trainings proved to be successful and beneficial when assisting agencies and departments.
- Crystal Stairs successfully participated in Covered CA enrollment events where the Covered CA O&E educators referred clients to agency's Medi-Cal table for further screening and potential enrollment
- LAUSD was able to offer Medi-Cal application assistance to clients in a variety of ways and provided clients following options to obtain

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enrollment assistance: 1) over the phone enrollment, 2) an appointment at an Enrollment Hub, 3) an appointment at an enrollment event (Saturdays), and 4) an appointment with a Healthy Start Navigator at a school

- Venice Family Clinic partnered with committed volunteer group to expand the amount of outreach/enrollment events with using minimal staff support
- Asian Pacific Health Care Venture, Inc. (APHCV) partnered with the Garfield Hospital to target Emergency Room patients. APHCV also conducted workshops inside local schools and partnered with the AHMC foundation to assist local library visitors with insurance coverage.
- Valley Community Clinic set up information booth in the clinic's lobby bi monthly to answer any questions related to healthcare coverage. In addition, staff delivered number of Medi-Cal coverage orientations to the clinic's visitors with the focus on perinatal patients

DPH/SAPC:

CASC providers conducted outreach at DPH/SAPC Homeless Encampment Projects in order to reach homeless SUD individuals that may be eligible for Medi-Cal

DHS:

Most CBOs reported that they were working with various community partners to identify target Medi-Cal population. Several CBOs reported participating in local health fare events and providing education to individuals, discussing healthcare needs, and screening individuals for Medi-Cal eligibility.

- Samuel Dixon collaborated with the Kaiser Permanente and, as a result of this collaboration, generated a lot of referrals of qualified individuals
- AltaMed has successfully employed a number of innovative outreach strategies, including: 1) utilizing clinic and outreach staff who are bilingual in English and Spanish to provide culturally and linguistically competent services to the target population with limited English proficiency, 2) working with Mexican Consulate to connect with families with mixed immigration status, 3) working one on one with individuals, especially young men of color
- Mission City identified potential Medi-Cal applicants by working with individuals and family members who qualified for Child Health and Disability Prevention Program (CHDP)
- Clinica Monseñor Oscar A. Romero trained their enroller to use an IPad tablet to complete Medi-Cal applications

Sheriff's Department:

As of October 1, 2014, Sheriff's Department staff began tracking Medi-Cal applications with the CHOI database. This approach has proven much more effective than previous method used in Quarter 1 and has greatly simplified the monthly reporting process

DMH:

The subcontractors focused on making contact with hard-to-reach clients by developing new collaborations with non-traditional mental health and human services providers, such as CBOs and Shelter Care providers. These providers often serve individuals who choose non-traditional settings due to the stigma of receiving mental health treatment. This strategy appears to have contributed to the subcontractors' recent in-reach and outreach success

DPSS:

None to report at this time.

5. Any project activities/successes that were not identified in the Work Plan, but are a "spin-off" of Work Plan activities.

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DPH/MCAH:

- APHCV enrollment worker regularly passed out flyers at shops, grocery stores, and hospitals. As time passed, the agency visibility in the community improved and, resultantly, increased number of submitted applications.
 - Child and Family Guidance Center successfully collaborated with different clinics and this collaboration was not identified in the agency's scope of work
 - Crystal Stairs became a Covered CA CEC that helped to target potential clients during Covered CA events
 - LUSD staff began to differentiate between outreach and in-reach activities and documented the difference in the Event Summary Form. It helped to identify ways to develop an integrated service approach
 - Northeast Valley Health Corporation created a roster of upcoming appointments to contact any patients with inactive coverage two weeks in advance and attempt to enroll them in time of their doctor's appointment
- DPH/SAPC:**
DPH/SAPC's original plans did not include using DPSS YBN web portal to process Medi-Cal applications and utilizing CHOI database system to track outreach and enrollment assistance. However, during the first month DPH/SAPC decided to use both services. The use of both systems in Quarter 2 had been extremely useful to CASC providers
- DHS:**
• Bartz-Altadonna reported the opportunity to be on a local radio station and discuss free enrollment assistance through the DHCS grant
- DMH:**
None to report at this time.
- DPSS:**
DPSS created a list of Taglines to present to external focus groups, ages 19-32. These focus groups will help to choose the best tagline that is most appealing to YMOC population and can be marketed at future outreach events
- Sheriff's Department:**
None to report at this time.

DPH/MCAH:

- 6. List project activities not completed during the quarter that were stated to be completed. If the activities completed differ from County's proposal, what caused these changes? Were activities delayed and if so, why? Will these activities be completed? When and how? Are there any activities County will not be able to complete during the course of this grant?**

DPH/MCAH:

Contracted agencies experienced time delays in hiring outreach and enrollment staff and entering in new agreements with partners. As a result, some agencies reported lower than expected Q2 outreach and enrollment numbers. Also some Medi-Cal applications took longer than 45 days to process which also impacted target numbers.

DPH/SAPC:

During the second quarter, CASC provider in SPA 1 experienced staff turnover. DPH/SAPC made arrangements to train the new staff person on the CHOI database so grant activities were not delayed.

DHS:
All of the CBOs, except for Chinatown Service Center, were unable to begin Medi-Cal application enrollments through the YBN portal until

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November. After the YBN training was completed on November 6, 2014, each of contracted CBO was able to receive their user access to the YBN system and begin enrollment. Once the CBOs received YBN access in November and in December, they began reportable enrollment and outreach activities immediately

DPS:

DPS has no project activities that were not completed during the Quarter 2.

DMH:
 None to report at this time.

Sheriff's Department:
 None to report at this time.

7. List any products developed, data sources and/or resources used

DPH/MCAH:

All DPH/MCAH contracted agencies are using CHOI database system to track outreach, enrollment, and retention activities. Contracted agencies created flyers, appointment lists, pamphlets, post cards, outreach calendars, and press releases to inform target populations about insurance coverage.

- APHCY created a checklist of documents in many different languages that needed to enroll in Medi-Cal
- City of Pasadena Public Health Department disseminated 400 CHOI tri-fold brochures to five community agencies
- Community Health Councils finalized presentation on the healthcare coverage to be used for outreach purposes
- Crystal Stairs utilized online County resources to search for clinics offering Children's Health Disability Prevention and Presumptive Eligibility services. Agency contacted these clinics to provide Medi-Cal O & E services to their patients
- LAUSD utilized transciency list of LAUSD schools and list of schools participated in Free and Reduced Lunch Program to perform outreach and enrollment activities

DPH/SAPC:

DPH/SAPC re-distributed blank CHOI database forms, revised the CASC provider project directory list, distributed Drug Medi-Cal Waiver, and developed CASC brochures. CASC providers created event flyers, PowerPoint presentations, and information sheets

DHS:

CBOs are using the CHOI database to track submitted applications and then follow clients through the utilization and redetermination process. Through a partnership with DPS, the YBN system is using to enroll individuals into Medi-Cal. Some CBOs developed Medi-Cal informational flyers and brochures which specified their contact information and enrollment locations

- Altamed is utilizing data collection software called Customer Relations Management (CRM). CRM allows tracking of completed applications, verification of enrollments, and ability to schedule appointments with the customer
- Bartz-Altadonna has done outreach through various social media networks

DMH:

In order to facilitate the enrollment of uninsured DMH clients into Medi-Cal, DMH developed site-specific lists of 1) indigent clients that appear to meet Medi-Cal expansion criteria and 2) clients whose Medi-Cal benefits were established via the Hospital Presumptive Eligibility (HPE) portal and began sending these lists to the clinics on a monthly basis. DMH also provided a tabulation of the clinics' counts to the subcontractors so they can prioritize their outreach efforts.

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DPSS: DPSS created the QR code to use during outreach events. DPSS felt that having a QR code that gives quick access to YBN and the application process, would be appealing to YMOC population

Sheriff's Department:

None to report at this time.

8. Any challenges/barriers encountered and proposed solutions.

DPH/MCAH:

- Computer Therapy LLC reported some challenges related to a lack of physical forms trainings for contracted agencies. "Refresher" trainings are scheduled for January 2015 to assist agencies with data entry
- Northeast Valley Health Corporation, among other agencies, experienced delays in processing applications due to extended Medi-Cal backlog.
- Agency staff facilitated "emergency cases" by contacting their DPSS liaisons for assistance
- APHCV provided case worker's contact information to clients in order to conduct the follow-up of status. In addition, APHCV used phone interpreter in the event an enrollment worker is experiencing language barrier with the client
- Citrus Valley Health Partners discovered that some individuals afraid to provide recent paystubs to check their Medi-Cal eligibility because they owe taxes to the IRS. Staff informed people that IRS issues are not connected to the Medi-Cal eligibility for coverage
- Child and Family Guidance Center increased the number of calls and spent more time on each case due to the County enrollment verification back log. In addition, low income home owners didn't want to apply for Medi-Cal because they are afraid of losing their homes. Staff took extra time to educate these families on Medi-Cal requirements and explained how the law may affect their home ownership. Finally, it was a challenge to communicate with case workers for troubleshooting. Staff helped clients to write letters to workers and provided instructions to follow up on these letters
- LAUSD stated that troubleshooting assistance is very time consuming and often interferes with ability to complete SOW. Since CHOI data system is not capturing time spend on troubleshooting, agency is suggesting to somehow add "time spent" future to the CHOI database. Also LAUSD used notes section of the CHOI database to capture advocacy attempts and outcomes for each client in order to follow up on county or state confirmed enrollment delay
- St. Francis Medical Center of Lynwood Foundation reported DPS's network/computer issues that hinder ability to follow up on Medi-Cal applications and outcomes. Agency contacted DPSS Medi-Cal eligibility workers directly to obtain an outcome and application status
- Valley Community Healthcare reported that the state database system constantly delayed the streamlined process intended for Medi-Cal applications. Agency effectively used the assistance of Outstation DPSS workers to facilitate applications submittal and approval
- Venice Family Clinic reported tremendous impact of Medi-Cal terminations on the agency work load. Many clients didn't receive any notice about termination of their coverage. Agency assigned special days for these clients to clarify and resolve coverage termination

DPH/SAPC:

DPH/SAPC faced challenge of getting all CASC providers on board with utilizing the CHOI database. This challenge was effectively resolved by SAPC and CASC staff by coordinating joined monthly meetings.

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DHS:

The lack of access to the YBN web portal until November (until December for some CBOs) hindered DHS ability to meet enrollment target in Quarter 2. In addition, the processing time for Medi-Cal applications is still longer than expected. Some CBOs reported a challenge due to changes in staff, resulting in extra time needed to hire and train new Medi-Cal enrollers. Individuals with valid work permit are eligible for full scope Medi-Cal. However, DPSS worker, by mistake, provided incorrect information to these individuals that they only qualified for restricted Medi-Cal. The fact that DPSS did not give accurate information to the client made outreach and enrollment efforts very difficult. When CBOs tried to call the DPSS Medi-Cal office for assistance the wait on the found could be over an hour long, or disconnection of the line would occur. This situation caused a lot of frustrations to the clients and Medi-Cal enrollers at the clinic.

DMH:

In addition to the ongoing challenge of market saturation for Medi-Cal outreach and enrollment services, the subcontractors also experienced a significant lag time between the filing and approval date for the majority of completed applications filed. The processing delays required them to keep client records open and active for months in order to stay engaged with applicants until enrollment occurred instead of using the time to assist new applicants.

Sheriff's Department:

During October – November, 2014, Sheriff's experienced some personnel changes. Getting the replacement personnel up to speed and trained caused a little behind of second quarter target numbers. Now current personnel are fully trained to meet grant's target numbers.

DPSS:

DPSS outreach staff stated that YMOC prefer to apply for Medi-Cal coverage not during outreach events but at a later date via YBN, over the phone, mailing the application, or walking into a district. In addition to taking applications, outreach staff also provided information, distributed literature and applications, and created a "buzz" about applying for Medi-Cal. Because the department has seen a huge influx in the number of applications for our target population, DPSS is currently exploring options to be able to capture a more accurate count of YMOC applications and enrollments which plan to be implemented in the future to better gauge the number of applications and enrollments that have generated as a result of the buzz.

9. State if Department/sub-contractors/other partnering organizations received funding from other foundations, corporations or government bodies for the Medi-Cal O&E efforts currently supported by this grant. If so, provide funder's name, the amount of funding provided, and when it was provided. If the support is in-kind and can be estimated in \$, please provide the figure.

DPH/MCAH:

- LAUSD currently receives funds from the Centers for Medicaid and Medicare Services, Children's Health Insurance Program Re-Authorization Act, Cycle III. Funding amount of \$976,000 was provided on 8/1/2013. Funding term is over on 6/30/2015. LAUSD also receives funds from Covered California Outreach and education Grant. Funding amount of \$90,000 was provided on 08/01/2013. Funding term is over on 02/28/2015
 - Northeast Valley Health Corporation currently receives funds from CHIPRA (\$310,493 for FY 2014-2015, funding was provided on 07/01/2013) and HRSA (\$463,444 for FY 2014-2015, funding was provided on 07/15/2013)
 - Venice Family Clinic currently receives funds from HRSA (\$166,789 for FY 2014-2015, funding was provided on 07/01/2013).
 - APHCY receives funds from HRSA (\$122,937 for FY 2014-2015, funding was provided on 08/15/2014)
 - DPH/MCAH receives \$4.6 million for outreach and enrollment services provided by our local First organization (First 5LA) with the target

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population of families with children ages 0-5. The First 5LA funding provides the bulk of infrastructure and overhead costs enabling the 17 CBOs schools, and clinics to provide additional services to an expanded target population using the smaller amount of DHCS funding (\$700,000 per year). Leveraging each funding source creates synergy for both outreach and enrollment projects. DPH/MCAH provides in-kind support from a total of 2.5 FTE staff whose salaries are not covered by this grant (positions include Research Analyst III, Staff Analysts, Accounting Tech, and Intermediate Clerk)

DHS:

- Clínica Monseñor Óscar A. Romero (CMR) currently receives funds from the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) to provide outreach and enrollment services. During July 1, 2014 to September 30, 2014, HRSA provided CMR with \$59,928 in funding for these efforts, \$179,785 from October 1, 2014 to August 31, 2015 and thereafter on an ongoing basis. CMR is subcontracted by Asian Americans Advancing Justice to provide ACA education and enrollment services in the Boyle Heights neighborhood of Los Angeles. Total granted funds are \$50,000 for work performed during February 1, 2014 to January 31, 2015

DPH/SAPC:**DHCS:** None to report at this time**DMH:****DHCS:** None to report at this time**DPSS:****DHCS:** None to report at this time**Sheriff's Department:****DHCS:** None to report at this time**10. Describe whether DPH/MCAH assisted or failed to assist Departments in any way during this time period.****DPH/SAPC:****DHCS:** DPH/MCAH has been extremely helpful during the second quarter**DHS:****DHCS:** DHS has received all the assistance requested from DPH/MCAH on a regular basis and in a timely way**DMH:****DHCS:** DPH/MCAH continued to be supportive of DMH and its subcontractors by serving as an intermediary between the Collaborative and the State**DPSS:****DHCS:** DPH/MCAH assisted the DPSS with coordinating regular conference calls for project updates, deadlines, and guidance and responded promptly to all inquiries**Sheriff's Department:****DHCS:** The personnel assigned to the CHOI program have been extremely helpful and have gone out of their way to assist department in any way possible**11. Any other aspect of the project to share pertaining to this Medi-Cal O&E initiative.**

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DPH/SAPC:

DPH/SAPC continues to notify CASC providers about the Board of Supervisors recommendation to complete 10% above the projected outreach goals and enrollment numbers and also to reach out to the faith-based communities in their SPAs

DPSS:

Not at this time

DPHMCAH:

- Citrus Valley Health Partners reported outstanding staff success by confirming enrollment in second quarter. The agency achieved 91.36% enrollment verification rate (74 applications of 81 were confirmed enrolled)
- Computer Therapy explored opportunity to give CHOI database users the choice of adding another enrollment record when they reach the end of the follow up wizard. In addition to this improvement, agency also suggested to add a “flagging/tickler” ability in the CHOI database
- Crystal Stairs reported expansion of their services to serve children and families in the cities of Hawthorne and Inglewood

DHS:

None to report at this time

DMH:

None to report at this time

Sheriff's Department:

None to report at this time

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**Outreach, Enrollment, and Retention Summary
 County: LOS ANGELES**

Reporting Period: October 1, 2014 to: December 31, 2014

Major Deliverables and Activities	AB 82 Target Population Reached	Materials	Staff and/or CBO's Used	Performance Measures and Data Collection	Status
<i>Include reference to the major outcome objectives indicated in your work plan</i>	Specify target audience	Specify all materials developed, finalized, or distributed (radio/TV/print ads, brochures, flyers, etc.) using allocation funds	Indicate staff responsible and/or CBO's used	Provide achievements, percentages, and numbers for the quarter, and YTD that document achievements.	Indicate the completion date. If not completed, indicate the projected completion date. Provide a reason if date is different than on the approved work plan.
Outreach	<ul style="list-style-type: none"> • Families of mixed-immigration status • Persons with limited English proficiency • Persons with substance use disorder needs • Persons who are homeless • Young men of color • Persons with mental health disorder needs • Persons who are in county jails, county probation, or under post release community supervision 	<ul style="list-style-type: none"> • Flyers, pamphlets, post cards, appointment lists, outreach calendars, information sheets, event summary forms, and press releases • Discussion of free Medi-Cal enrollment assistance on a local radio station 	LA County Departments, contracted and subcontracted agencies Bartz-Altadonna Community Health Center	Outreach and in-reach activities were provided to 25,239 persons. This number indicates 67.8% of the Collaborative annual target	On track
Enrollment			Northeast Valley Health Corporation Computer Therapy LLC	4,136 persons were assisted to complete Medi-Cal applications in Quarter 2. Year to date number of completed Medi-Cal applications is 7,860 or 32.1% of the Collaborative annual target	On track
Retention			DPSS DMH	880 applicants were confirmed as newly enrolled in Quarter 2. Year to date number of newly enrolled confirmations is 1,405 or 10.3% of the Collaborative annual target	N/A

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List of Common Acronyms

CASC – Community Assessment Service Center
CBO – Community-Based Organization
CEC – Certified Enrollment Counselor
CHOI – Children's Health Outreach Initiatives
CRM – Customer Relations Management
DHCS – California Department of Health Care Services
DHS – Department of Health Services
DMH – Department of Mental Health
DPH – Department of Public Health
DPSS – Department of Public Social Services
FBO – Faith-Based Organization
MCAH – Maternal, Child, and Adolescent Health
MCHA – Maternal and Child Health Access
MOU – Memorandum of Understanding
O&E – Outreach and Enrollment
SAPC – Substance Abuse and Prevention Control
SMHS - Specialty Mental Health Services
SPA – Service Planning Area
SUD – Substance Use Disorder
YBN – Your Benefits Now!
YMOC – Young Men of Color

California Department of Health Care Services

LOS ANGELES COUNTY MEDI-CAL OUTREACH AND ENROLLMENT GRANT

Fiscal Year 2014-2015

DATA SUMMARY

FY 2014-2015 Annual Target Numbers*

	DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH	6960	10000	9520	7200	15000	4200	52880
ENROLLMENT	Completed Application	1015	10000	2570	5400	4000	1470
	Confirmed Enrollment	1015	2500	1928	4050	3000	1103
RETENTION	Redetermination Assistance	660	N/A	TBD**	2194	1950	717
							5521

Quarter 1 (July, 2014 - September, 2014)

	DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH	0	2845	1321	807	4879	379	10231
ENROLLMENT	Completed Application	0	2845	51	53	768	7
	Confirmed Enrollment	0	379	13	0	129	4
RETENTION	Redetermination Assistance	0	0	0	0	0	0

Quarter 2 (October, 2014 - December, 2014)

	DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH	2600	1930	6191	4968	6628	.2922	25239
ENROLLMENT	Completed Application	67	1782	408	413	1412	54
	Confirmed Enrollment	34	276	128	48	394	0
RETENTION	Redetermination Assistance	0	0	0	0	0	0

FY 2014-2015 Year to Date Numbers

	DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH	2600	4775	7512	5775	11507	3301	35470
ENROLLMENT	Completed Application	67	4627	459	466	2180	61
	Confirmed Enrollment	34	655	141	48	523	4
RETENTION	Redetermination Assistance	0	0	0	0	0	0

FY 2014-2015 Year to Date Completion, %

	DPSS	SHERIFF'S	DMH	DHS	DPH/MCAH	DPH/SAPC	Total
OUTREACH	37.4	47.8	78.9	80.2	76.7	78.6	67.1
ENROLLMENT	Completed Application	6.6	46.3	17.9	8.6	54.5	4.1
	Confirmed Enrollment	3.3	26.2	7.3	1.2	17.4	0.4
RETENTION	Redetermination Assistance	0.0	N/A	TBD**	0.0	0.0	0.0

* Annual target numbers based on the 2014--2016 Work Plan

** DMH performs retention activities without numerical target

Outreach is a service provided when we raise an individual's awareness understanding of what is Medi-Cal and what can be done to enroll. **Enrollment** is measured as the number of approved Medi-Cal applications resulting from Medi-Cal outreach and application assistance efforts. **Completed applications** is defined as the number of clients assisted to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission.

Confirmed enrollment is defined as: 1) the number of clients who have stated that they received successful enrollment notification from insurer and/or 2) the number of clients who have been verified enrolled by appropriate insurer or computer system.

Retention is a service provided when we track an enrolled individual's re-application time line to Medi-Cal, and take all the available steps afforded by that individual towards their continued enrollment in, and their retention of, Medi-Cal.

Redetermination assistance is defined as attempting to contact 100% of clients/beneficiaries (confirmed enrolled) and making successful contact with 65% of those clients/ beneficiaries either in-person or by telephone to determine whether assistance is needed at time of annual eligibility review/renewal.

